FORM D

SEE Wan D

Wall Frocessing

WAR 12 2008

WAR 12 2008

Washington, OC

Washington, OC

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

14299	<i>′</i> / ン
OMB APPR	OVAL
OMB Number:	3235-0076
Expires:	
Estimated averag	je burden
hours per respons	se16.00

SEC	USE OI	NLY
Pretix		Serial
ĎΑ	TE RECEIV	ED
		1

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Private Placement of 180 Units of TIJV, L.L.C.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: Amendment	ULOE
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	08042384
TIJV, L.L.C. Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1401 Foucher Street New Orleans, LA 70115	(504) 897-8485
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
(If different from Executive Offices)	PROCESSED
Brief Description of Business	
Real Estate Holding Company	MAR 2 0 2008
Type of Business Organization corporation business trust limited partnership, already formed Limited Limited	case specify): Liability CompanyClat
Actual or Estimated Date of Incorporation or Organization: O B O C	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or 77d(6).	r Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205	49.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supplied be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sa ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the So are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	ecurities Administrator in each state where sales the exemption, a fee in the proper amount shall
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal extappropriate federal notice will not result in a loss of an available state exemption unles filing of a federal notice.	

			- A BASIG IDI	NTIRICATION DATA:			
2.	Enter the information	requested for the fo	llowing:				
	Each promoter or	f the issuer, if the is	suer has been organized w	ithin the past five years;			
	Each beneficial or	wner having the pow	er to vote or dispose, or dis	rect the vote or disposition	of, 10% or more of	f a class of equity securities	es of the issuer.
	Each executive or	fficer and director o	f corporate issuers and of	corporate general and mar	naging partners of	partnership issuers; and	
	Each general and	managing partner of	of partnership issuers.				
	ck Box(es) that Apply:	Promoter	K Beneficial Owner	Executive Officer	Director	General and/or Managing Partne	er
	Touro Infirma Name (Last name first						
		•	0-1 *1 70	115			
			Orleans, LA 70 Street, City, State, Zip Co				
Che	ck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partne	er
Full	Name (Last name first	, if individual)					•
Busi	iness or Residence Add	ress (Number and	Street, City, State, Zip Co	ode)			
Che	ck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partne	
Full	Name (Last name first	, if individual)			MM3+M3 ***\ ****** =		
Busi	iness or Residence Add	ress (Number and	Street, City, State, Zip Co	ode)			
Che	ck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partne	:r
Full	Name (Last name first	, if individual)					
Busi	iness or Residence Add	ress (Number and	Street, City, State, Zip Co	ode)			,
Che	ck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partne	er
Full	Name (Last name first	, if individual)					
Busi	iness or Residence Add	ress (Number and	Street, City, State, Zip Co	ode)			
Che	ck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partne	er
Full	Name (Last name first	, if individual)					
Busi	iness or Residence Add	ress (Number and	Street, City, State, Zip Co	ode)			· · · · · · · · · · · · · · · · · · ·
Che	ck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partne	er
Full	Name (Last name first	, if individual)					
Busi	iness or Residence Add	ress (Number and	Street, City, State, Zip Co	ode)			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

				Z B j	NFORMAT	ION ABOU	T OFFERI	NG S				
								Yes	No			
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									XI			
					Appendix	•						
2. What is	the minim	um investr	nent that w	ill be acce	pted from	any individ	lua!?		•••••••		\$_1 <u>.</u> 5	<u>000</u> .00
3. Does th	a offering	nermit kaln	t oumerchi	n of a cine	gle unit?						Yes	No
												P
										irectly, any he offering.		
										with a state		
					ore than 11Vi ion for that				cialed pers	ons of such		
Full Name (
Business or	Residence	Address (1	lumber and	l Street, C	ity, State, 2	Cip Code)				····		
	 _					<u> </u>						
Name of Ass	sociated Bi	roker or De	aler									
States in Wh	ich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers				····		
											□ AI	I States
(000	, ,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			0.0.00,	•••••••••••••••••••••••••••••••••••••••		••••••			***************************************	ш· ·	. 010.00
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	H	ID
IL.	[N]	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS)	MO)
MT	NE SC	NV	NH	NJ	NM TUE	NY	NC	ND	OH	OK)	OR	PA
RI	[30]	SD	TN	TX	UT	[VT]	VA	WA	WV	WI	WY	PR
Full Name (Last name	first, if ind	ividual)			• • • • • • • • • • • • • • • • • • • •						
			· · · · · · · · · · · · · · · · · · ·				. =					
Business or	Residence	Address (Number an	d Street, C	City, State,	Zip Code)	•					
Name of Ass	sociated Br	oker or De	aler					··········				
rumo or ris.	300/4104 23.	OKOI OI DO	4101									
States in Wi	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers			······································			
(Check	"All State:	s" or check	individual	States)							☐ Al	l States
AL	ĀK	ĀZ	নিচা	رحكا	الحصا	তিক	चिंद्री	(50	(RT)	المما	[77]	(TEXT)
		IA	AR KS	CA KY	CO LA	CT ME	DE MD	DC MA	FL MI	GA MN	MS MS	ID MO
MT	NE	NV	NH		NM)	NY	(NC)	ND)	OH)	OK)	OR	PA
RI	(SC)	SD	TN	ŒΧ	UT	VT	VΑ	WA	WV	WI)	WY	PR
Pall Maria C		C 161										
Full Name (Last name	mrst, 11 ina	(Vidual)									
Business or	Residence	Address (Number an	d Street, C	City, State,	Zip Code)	······					
	Business or Residence Address (Number and Street, City, State, Zip Code)											
Name of Associated Broker or Dealer												
		···										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)							_	_				
(Check	"All States	s" or check	individual	States)					•••••		☐ Al	1 States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	[ID]
IL	<u>[M]</u>	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	M	NM	NY	NC	ND	OH	<u>OK</u>	OR	PA
RI	SC	SD	TN	TX	UT	VT	[VA]	WA	WV)	WI	WY	PR

GOFFERINGPRICE NUMBERIOF INVESTORS EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt\$___0.00_ \$ 0.00 0.00 \$ 0.00 Equity\$___ Common Preferred 0.00 \$ 0.00 Convertible Securities (including warrants).....\$___ 0.00 \$ 0.00 Other (Specify LLC Interests) _______s 2,700,000 \$1,245,000 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases Accredited Investors 26 \$ 17200,000 s 45,000 2 Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C -- Question 1. Type of Dollar Amount Type of Offering Security Sold N/A 0.00 Rule 505 Regulation A N/A \$ 0.00 N/A 0.00 Rule 504 N/A 00\$00 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. n \$ 0.00 Transfer Agent's Fees Printing and Engraving Costs..... □ \$<u>9.395.80</u>

Furnish a statement of all expenses in connection with the issuance and distribution of the rities in this offering. Exclude amounts relating solely to organization expenses of the insurer. information may be given as subject to future contingencies. If the amount of an expenditure is known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees \$0.00

Printing and Engraving Costs \$9,395.80

Legal Fees \$60,536.73

Accounting Fees \$11,000.00

Engineering Fees \$280,800.00

Sales Commissions (specify finders' fees separately) \$0.00

Other Expenses (identify) Contractor/Consulting Fees \$114,724.11

Total \$476,456.64

COFFERING PL	HCE NUMBER OF INVESTORS, EXPENSES	AND USE OF PROCEEDS 2	
and total expenses furnished in response	gregate offering price given in response to Part C to Part C — Question 4.a. This difference is the	"adjusted gross	\$ 2,223,543.36
each of the purposes shown. If the arr	ted gross proceed to the issuer used or proposed to not for any purpose is not known, furnish a The total of the payments listed must equal the onse to Part C — Question 4.b above.	n estimate and	
		Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees		[] \$	_ []\$
Purchase of real estate		🗀 💲	
Purchase, rental or leasing and installa	ution of machinery	5 .	₼
Construction or lessing of plant buildi	ngs and facilities	D: 0.00	$-\frac{13}{2,223,543.36}$
•	ding the value of securities involved in this		- LJ*
offering that may be used in exchange		□ \$	П\$
			
			
		-	
		[\$	_ [] \$
Column Totals			□\$ 2,223,543.36
Total Payments Listed (column totals	added)		2,223,543.36
	DIFEDERALSIGNATURE	~ -	
ignature constitutes an undertaking by the	igned by the undersigned duly authorized perso issuer to furnish to the U.S. Securities and Exc any non-accredited investor pursuant to paragi	hange Commission, upon writt	
ssucr (Print or Type)	Signature	Date	
TIJV, L.L.C.	Magneta	15A 310	2008
Name of Signer (Print or Type)	Title of Signey (Print or Type)		
Ralph Dean	Manage		
Name of Signer (Print or Type) Ralph Dean	Title of Signer (Print or Type) Manager		

ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGN	ATURE						
1.	. Is any party described in 17 CFR 230.262 presently subject to any o provisions of such rule?	Yes	No ☑					
	See Appendix, Column 5, f	or state response.						
2.	. The undersigned issuer hereby undertakes to furnish to any state admir D (17 CFR 239.500) at such times as required by state law.	nistrator of any state in which this notice is f	iled a not	tice on Form				
3.	. The undersigned issuer hereby undertakes to furnish to the state admissuer to offerees.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.						
4.	limited Offering Exemption (ULOE) of the state in which this notice	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.						
	suer has read this notification and knows the contents to be true and has du authorized person.	ly caused this notice to be signed on its beha	lf by the	undersigned				
Issuer ((Print or Type) Signature	Date						
T	TIJV, L.L.C. Gelgu	POPERU 310	ZO	08				
Name ((Print or Type) Title (Print or Type)							
Ra	Ralph Dean Manager							

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

		eg ar diagoni Posta and		AP	PENDIX				
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pur	investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
со									
СТ							_		
DE			, 				w		
DC									
FL							· · · · · · · · · · · · · · · · · · ·		
GA									
ні									
ΙD									
IL									
IN									
IA									
KS									
KY									
LA	Х		LLC Interests 2,700,000.00	26	1,200,00	0 2	45,000		x
ME			·						
MD									
MA									
MI									
MN									
MS			<u> </u>						

				Š ŽAPPI	NDIX:				\$ 19.72 kg
1	to non-ac	to sell	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
мо									
MT									
NE					······································				
NV			-		- 1				
NH									
NJ									
NM									
NY									
NC					1				
ND									
ОН									
ок									
OR									
PA									
RI									
SC									
SD									
TN									
TX									
UT									
VT						_			
VA									
WA									
wv									
WI									

				ĀPĒ	ENDIX				
1	Intend to sell		3 Type of security and aggregate		5 Disqualification under State ULOE (if yes, attach				
	to non-accredited offering price investors in State (Part B-Item 1) (Part C-Item 1)				explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

END